

E-filed on December 13, 2023**KEVIN A DARBY 7670**

Name

**7670 NV**

Bar Code #

**499 W. PLUMB LANE,  
SUITE 202  
Reno, NV 89509**

Address

**775.322.1237**

Phone Number

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEVADA**In re: **ATTASHIAN ENTERPRISES, LLC**Case No.: **23-50818**Chapter: **11**

Trustee

Debtor(s)**AMENDMENT COVER SHEET**

The following items have been amended in the above named bankruptcy proceeding (check all applicable boxes).

- ☐ Voluntary Petition (specify reason for amendment)
- ☐ Summary of Schedules
- ☐ Statistical Summary of Certain Liabilities
- ☐ Schedule A - Real Property
- ☒ Schedule B - Personal Property
- ☐ Schedule C - Property Claimed as exempt
- ☒ Schedule D, E, or F, and/or Matrix, and/or List of Creditors or Equity Holders
- ☒ Add/delete creditor(s), change amount or classification of debt - **\$32 Fee required**
- ☐ Add/change address of already listed creditor - **No fee**
- ☒ Schedule G - Schedule of Executory Contracts and Unexpired Leases
- ☐ Schedule H - CoDebtors
- ☐ Schedule I - Current Income of Individual Debtor(s)
- ☐ Schedule J - Current Expenditures of Individual Debtor(s)
- ☐ Declaration Concerning Debtor's Schedules
- ☐ Statement of Financial Affairs and/or Declaration
- ☐ Chapter 7 Individual Debtor's Statement of Intention
- ☐ Disclosure of Compensation of Attorney for Debtor(s)
- ☐ Statement of Current Monthly Income and Means Test Calculation
- ☐ Certification of Credit Counseling
- ☐ Other: \_\_

**Amendment of debtor(s) Social Security Number requires the filer to follow the instructions provided by the Office of the U.S. Trustee, see link to the U.S. Trustee's website on our website: [www.nvb.uscourts.gov](http://www.nvb.uscourts.gov)**

E-filed on December 13, 2023

**Declaration of Debtor**

I (We) declare under penalty of perjury that the information set forth in the amendment(s) attached hereto is (are) true and correct to the best of my (our) information and belief.

/s/ PEZANT PETER ATTASHIAN

PEZANT PETER ATTASHIAN

**Debtor's Signature**

**Date:** December 13, 2023

**Fill in this information to identify the case:**Debtor name **ATTASHIAN ENTERPRISES, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **23-50818**
☐ Check if this is an amended filing
**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **WELLS FARGO BANK****BUSINESS CHECKING****0601****\$22,000.00**3.2. **WELLS FARGO BANK (PPA dba)****BUSINESS CHECKING****4598****\$222.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$22,222.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

Debtor **ATTASHIAN ENTERPRISES, LLC**  
NameCase number (If known) **23-50818****Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	<b>Raw materials</b> <b>PART INVENTORY</b>		<b>\$0.00</b>		<b>\$10,000.00</b>
20.	<b>Work in progress</b>				
21.	<b>Finished goods, including goods held for resale</b>				
22.	<b>Other inventory or supplies</b>				
23.	<b>Total of Part 5.</b> Add lines 19 through 22. Copy the total to line 84.				<b>\$10,000.00</b>
24.	<b>Is any of the property listed in Part 5 perishable?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
25.	<b>Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current Value _____				
26.	<b>Has any of the property listed in Part 5 been appraised by a professional within the last year?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	<b>Office furniture</b> <b>OFFICE FURNITURE</b>	<b>\$0.00</b>		<b>\$2,500.00</b>

Debtor ATTASHIAN ENTERPRISES, LLC  
NameCase number (If known) 23-5081840. **Office fixtures**41. **Office equipment, including all computer equipment and communication systems equipment and software**  
**OFFICE EQUIPMENT, COMPUTERS AND COMMUNICATION SYSTEMS**\$0.00\$4,000.0042. **Collectibles** *Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$6,500.0044. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒
- No
- 
- ☐
- Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒
- No
- 
- ☐
- Yes

**Part 8: Machinery, equipment, and vehicles**46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐
- No. Go to Part 9.
- 
- ☒
- Yes Fill in the information below.

**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**47.1. **2022 FORD BRONCO**\$0.00\$44,468.0048. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**  
**TOOLS**\$0.00\$3,500.00**SCAN TOOLS AND EQUIPMENT**\$0.00\$7,500.00**VEHICLE AND TRANSMISSION LIFTS**\$0.00\$15,000.0051. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$70,468.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**

Debtor ATTASHIAN ENTERPRISES, LLC  
NameCase number (If known) 23-50818

- ☐ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☐ Yes Fill in the information below.

Current value of  
debtor's interest71. **Notes receivable**  
Description (include name of obligor)72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)**POTENTIAL EMPLOYEE RETENTION CREDIT**Tax year **2020-2022****Unknown**73. **Interests in insurance policies or annuities**74. **Causes of action against third parties (whether or not a lawsuit has been filed)**75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**76. **Trusts, equitable or future interests in property**77. **Other property of any kind not already listed** Examples: Season tickets, country club membership78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$0.00**

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Debtor **ATTASHIAN ENTERPRISES, LLC**  
NameCase number (If known) **23-50818****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$22,222.00</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$0.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$10,000.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$6,500.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$70,468.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$109,190.00</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$109,190.00</b>

**Fill in this information to identify the case:**Debtor name **ATTASHIAN ENTERPRISES, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **23-50818**
☒ Check if this is an amended filing
**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>STATE OF NEVADA DEPARTMENT OF TAXATION</b> <b>1550 COLLEGE PARKWAY, SUITE 115</b> <b>CARSON CITY, NV 89706</b> Date or dates debt was incurred <b>2023</b> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SALES TAX</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b> <b>\$5,000.00</b>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address <b>AMERICAN EXPRESS</b> <b>PO BOX 98535</b> <b>EL PASO, TX 79998-1535</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>UNSECURED BUSINESS CREDIT</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$112,106.65</b>
3.2	Nonpriority creditor's name and mailing address <b>ARAMARK</b> <b>22512 NETWORK PLACE</b> <b>CHICAGO, IL 60673</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>3649</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>TRADE DEBT</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$503.25</b>



Debtor	<b>ATTASHIAN ENTERPRISES, LLC</b> <small>Name</small>	Case number (if known)	<b>23-50818</b>
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3.3	<b>Nonpriority creditor's name and mailing address</b> <b>ARAMARK</b> <b>22512 NETWORK PLACE</b> <b>CHICAGO, IL 60673</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>4367</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,177.57</b>
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3.4	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO ZONE</b> <b>123 S. FRONT STREET</b> <b>MEMPHIS, TN 38103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,993.40</b>
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>BANK OF AMERICA</b> <b>PO BOX 660441</b> <b>DALLAS, TX 75226</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>8845</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>UNSECURED BUSINESS CREDIT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,193.08</b>
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>CERTIFIED TRANSMISSION</b> <b>1801 SOUTH 54TH STREET</b> <b>OMAHA, NE 68106</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$87,262.01</b>
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>CPMNV</b> <b>3545 AIRWAY DRIVE</b> <b>SUITE 113</b> <b>RENO, NV 89511</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>FEDEX</b> <b>FEDEX CORP. REVENUE SERVICES</b> <b>3965 AIRWAYS</b> <b>MODULE G</b> <b>MEMPHIS, TN 38116</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,098.29</b>
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>LIBERTY MUTUAL INSURANCE</b> <b>PO BOX 91013</b> <b>CHICAGO, IL 60680</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>6720</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TRADE DEBT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,412.32</b>
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Debtor **ATTASHIAN ENTERPRISES, LLC**  
NameCase number (if known) **23-50818**

3.10 Nonpriority creditor's name and mailing address

**PDQ AUTOMATIC TRANS PARTS  
8380 TIOGAWOODS DRIVE  
SACRAMENTO, CA 95828**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **TRADE DEBT**Is the claim subject to offset? ☒ No ☐ Yes**Unknown**

3.11 Nonpriority creditor's name and mailing address

**WELLS FARGO SBL  
PO BOX 29482  
PHOENIX, AZ 85038-8650**

Date(s) debt was incurred \_

Last 4 digits of account number **4279**As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **UNSECURED BUSINESS CREDIT**Is the claim subject to offset? ☒ No ☐ Yes**\$10,908.07**

3.12 Nonpriority creditor's name and mailing address

**WESTERN INDUSTRIAL PARTS  
5355 LOUIE LANE  
RENO, NV 89511**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **TRADE DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$2,004.83****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>BANK OF AMERICA PO BOX 15796 WILMINGTON, DE 19886</b>	Line <b>3.5</b>  <input type="checkbox"/> Not listed. Explain _____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>5,000.00</b>
5b. +	\$ <b>252,659.47</b>
5c.	\$ <b>257,659.47</b>

**Fill in this information to identify the case:**Debtor name **ATTASHIAN ENTERPRISES, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **23-50818**

☐ Check if this is an amended filing

**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

*Property***2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Sub-Lease for 2515,  
2525, 2509 and 2507  
Sutro Street, Reno, NV  
89512  
MONTH TO MONTH**

**PETER ATTASHIAN  
2515 SUTRO STREET  
RENO, NV 89512**